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_		
_ Chapter you are filing under:		
☐ Chapter 7		
☐ Chapter 11		
☐ Chapter 12		
Chapter 13		Check if this an amended filing
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Matthew	Mona
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Solomon	Solomon
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1746	xxx-xx-6610

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Debtor 1 Matthew Solomon
Debtor 2 Mona Solomon

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live	807 Mansfield Court	If Debtor 2 lives at a different address:				
		Schaumburg, IL 60194 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6. Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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	otor 1 otor 2	Matthew Solomon Mona Solomon				— —	Case r	number (if known)	
Par	t 2:	Tell the Court About \	our Bank	ruptcy Ca	ase				
7.	Bank	chapter of the cruptcy Code you are			orief description of each, see a			C. § 342(b) for Individuals	Filing for Bankruptcy
	choc	sing to file under	☐ Chap	ter 7					
			☐ Chap	ter 11					
			☐ Chap	ter 12					
			■ Chap	ter 13					
8.	How	you will pay the fee	abo ord a p	out how you ler. If your re-printed reed to pay	e entire fee when I file my per ou may pay. Typically, if you a attorney is submitting your paraddress. If the fee in installments. If your in Installments (Official Form	re paying ayment or ou choos	the fee yourself, your behalf, you	you may pay with cash, ca r attorney may pay with a	ashier's check, or money credit card or check with
			☐ I re	equest that is not requires to you	at my fee be waived (You ma uired to, waive your fee, and our family size and you are una on to Have the Chapter 7 Filin	y request may do so able to pa	only if your incor the fee in install	me is less than 150% of the ments). If you choose this	ne official poverty line that option, you must fill out
9.		you filed for cruptcy within the	□ No.						
		B years?	Yes.						
				5 1.1.	Northern District of		E4040		0.40000
				District	Illinois	When	5/10/13		3-19929
				District		_ When		Case number	
				District		_ When		Case number	
10.		any bankruptcy s pending or being	■ No						
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.						
				Debtor				Relationship to you	
				District	-	_ When		Case number, if kno	own
				Debtor				Relationship to you	
				District		_ When		Case number, if kno	wn
11.		ou rent your	□ No.	Go to li	ine 12.				
	resid	lence?	Yes.	Has yo	our landlord obtained an evicti	on judgm	ent against you a	nd do you want to stay in	your residence?
					No. Go to line 12.				
					Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	t About ai	Eviction Judgme	ent Against You (Form 101	A) and file it with this

Matthew Solomon

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Deb	otor 2 Mona Solomon				Case number (if known)	
Par	Report About Any Bu	ısinesses	You Owr	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code	
	it to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate flines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code	
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				_
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to	□ Tes.	What is	the hazard?		
	public health or safety?					
	Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
					Number, Street, City, State & Zip Code	

Matthew Solomon

Debtor 1

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Debtor 1 Matthew Solomon
Debtor 2 Mona Solomon

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-14784 Doc 1 Filed 05/11/17 Entered 05/11/17 12:07:40 Desc Main Document Page 6 of 60

	otor 2 Mona Solomon	•			Case number	(if known)			
Par	t 6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily co			ned in 11 U.S.C. § 101(8) as "incurred by an			
			□ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily but money for a business or inve						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you o	we that are not consu	mer debts or business	s debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter	7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. I are paid that funds will be av			erty is excluded and administrative expenses			
	administrative expenses		□ No						
	are paid that funds will be available for		□Yes						
	distribution to unsecured creditors?								
18.	How many Creditors do	■ 1-49		1 ,000-5,000		2 5,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000			
		☐ 100-1 ☐ 200-9		☐ 10,001-25,0	000	☐ More than100,000			
19.	How much do you	□ \$0 - \$		□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	\$10,000,001		□ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000	□ \$50,000,001 □ \$100,000,00	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		□ \$500,	,001 - \$1 million	— \$100,000,00	γι - φοσο million	I Wore than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$	550,000	□ \$1,000,001		☐ \$500,000,001 - \$1 billion			
	to be?	_ ' '	001 - \$100,000	□ \$10,000,001		□ \$1,000,000,001 - \$10 billion			
			,001 - \$500,000 ,001 - \$1 million	□ \$50,000,001 □ \$100,000,00	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		— \$500,	OOT - \$1 IIIIIIOII						
Par	Sign Below								
For	you	I have ex	kamined this petition, and I dec	clare under penalty of p	perjury that the inform	nation provided is true and correct.			
						under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.			
			orney represents me and I did r nt, I have obtained and read th			an attorney to help me fill out this			
		I request	t relief in accordance with the c	chapter of title 11, Unit	ed States Code, spec	ified in this petition.			
			tcy case can result in fines up t			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Matt	thew Solomon		/s/ Mona Solomo	on			
			w Solomon e of Debtor 1		Mona Solomon Signature of Debtor	2			
		Executed	d on _ May 08 2017		Executed on May	v 08 2017			
			MM / DD / YYYY		MM	/ DD / YYYY			

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	Maulana Calaman	Document	Page 7 of 60		
Debtor 1 Debtor 2	Matthew Solomon Mona Solomon		Cas	se number (if known)	
•	attorney, if you are ted by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify the state of th	ed States Code, and have e	explained the relief ava	nilable under each chapter
•	not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.		` '	. , , , ,
		/s/ David P. Leibowitz	Date	May 08 2017	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		David P. Leibowitz			
		Printed name			
		Lakelaw			
		Firm name			
		420 W. Clayton Street			
		Waukegan, IL 60085			
		Number, Street, City, State & ZIP Code			

Email address

dleibowitz@lakelaw.com

Contact phone **8472499100**

1612271Bar number & State

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		Docum	CIL TAUC O DI UU				
ill in this information to identify your case:							
Debtor 1	Matthew Solomoi	1					
	First Name	Middle Name	Last Name				
Debtor 2	Mona Solomon						
Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS				
Case number _							

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	76,748.28
	1c. Copy line 63, Total of all property on Schedule A/B	\$	76,748.28
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	31,542.11
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	43,325.75
	Your total liabilities	\$	74,867.86
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,929.90
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,552.66
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	noroonal	family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1	Matthew Solomon		9	
Debtor 2	Mona Solomon		Case number (if known)	

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	7 500 00
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$ 7,583.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port 4 on Cohodula E/E compthe followings	To	tal claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Document Page 10 of 60 Fill in this information to identify your case and this filing: Debtor 1 **Matthew Solomon** Middle Name Last Name First Name Debtor 2 **Mona Solomon** (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number П Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Honda Do not deduct secured claims or exemptions. Put Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Civic Model ■ Debtor 1 only Creditors Who Have Claims Secured by Property. 2010 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 137800 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$5,100.00 \$5,100.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Nissan 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Altima** Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2016 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: ■ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$30,000.00 \$30,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

■ No

☐ Yes

Dobt	or 1	Case 17-1	_	Doc 1	Filed 05/11/17 Document	Entered 05/11/17 1 Page 11 of 60	2:07:40	Desc Main
Debt Debt		Mona Solomo				Case num	ber (if known)	
						om Part 2, including any entri		\$35,100.00
		scribe Your Persor						
·		·			est in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E:	xample No	old goods and fues: Major appliand			nina, kitchenware			
-	Yes.	Describe						
			Bedroo	m sets, fur	niture, photo album	s, kitchenware		\$1,000.00
E:	No.	es: Televisions an			stereo, and digital equip ia players, games	oment; computers, printers, scan	ners; music c	ollections; electronic devices
			Five tvs	, desktop,	three laptops, iPad,	two video game systems		\$1,000.00
<i>E</i> :	xample No	oles of value es: Antiques and to other collection				oks, pictures, or other art objects	; stamp, coin,	or baseball card collections;
E	xample No	ent for sports an es: Sports, photog musical instru Describe	graphic, ex		other hobby equipment;	bicycles, pool tables, golf clubs,	skis; canoes a	and kayaks; carpentry tools;
	No .		, shotguns	, ammunition	i, and related equipmen	t		
11. C	lothes Examp No	S	thes, furs,	leather coats	s, designer wear, shoes	, accessories		
			Necess	ary wearin	g apparel			\$600.00
	No		velry, costu	ume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, wat	ches, gems, g	old, silver

13. **Non-farm animals** *Examples:* Dogs, cats, birds, horses

☐ No

Yes. Describe.....

iWatch, basic accessories

\$100.00

Case 17-14784 Doc 1 Filed 05/11/17 Entered 05/11/17 12:07:40 Desc Main Document Page 12 of 60 Debtor 1 **Matthew Solomon** Debtor 2 **Mona Solomon** Case number (if known) 1 dog ("Baby") \$5.00 14. Any other personal and household items you did not already list, including any health aids you did not list □ No Yes. Give specific information..... \$10.00 CPAP machine 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,715.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No \$60.00 Cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking **USAA** \$136.12 17.2. Checking **USAA** \$10.51 Savings (son's **USAA** \$15.64 17.3. account) **USAA** \$2.00 Savings \$895.52 Chase Checking 17.5.

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

■ No

☐ Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

■ No

 \square Yes. Give specific information about them.....

Name of entity:

% of ownership:

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De	ebtor 2	Mona Solomo	on	Case number (if known)	
	Negotial Non-neg	ble instruments i	nclude personal checks, ca	potiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
	■ No				
	⊔ Yes. G	ive specific infor	mation about them Issuer name:		
21.		ent or pension a es: Interests in IR		403(b), thrift savings accounts, or other pension or profit-sharing plans	
	■ Yes. Li	st each account	separately. Type of account:	Institution name:	
			IRA	Chase	\$26,280.57
			401k	LPL Financial	\$1,776.00
			401k	Fidelity	Unknown
			401k	Principal	\$2,593.08
			Pension	Right to receive pension from Coast Guard	\$0.00
			Profit-sharing	Empower Retirement	\$5,663.84
	Your sha		deposits you have made s	so that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications companies, or	others
				Institution name or individual:	
			Rent	(Landlord)	\$1,500.00
23.	Annuitie	s (A contract for	a periodic payment of mor	ney to you, either for life or for a number of years)	
	■ No □ Yes	lssı	uer name and description.		
			n IRA, in an account in a 29A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition program.	
	Yes	Inst	titution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
	■ No	•	rmation about them	other than anything listed in line 1), and rights or powers exercisab	le for your benefit
	Patents,	copyrights, tra	demarks, trade secrets, a	and other intellectual property leds from royalties and licensing agreements	
	■ No □ Yes. G	Give specific info	rmation about them		
	Example ■ No	es: Building perm	nd other general intangib nits, exclusive licenses, coo rmation about them	les operative association holdings, liquor licenses, professional licenses	
	<u> </u>	and sharing illion	imation about thelli		

Schedule A/B: Property

Matthew Solomon

Debtor 1

		Case 17-14		Doc 1	Filed 05/11/17 Document	Entered 05/11/17 12:07:40 Page 14 of 60	Desc Main
Debte Debte		Matthew Solon Mona Solomor				Case number (if known)	
Mone	ey or p	property owed to y	you?				Current value of the portion you own? Do not deduct secured
							claims or exemptions.
	No	unds owed to you		oout them, inc	cluding whether you alre	ady filed the returns and the tax years	
E	Exampl No	support les: Past due or lun Give specific inform	·	,	usal support, child supp	ort, maintenance, divorce settlement, property	/ settlement
E	Exampl No	mounts someone les: Unpaid wages, benefits; unpai	, disabili id loans	ty insurance į		efits, sick pay, vacation pay, workers' compe	ensation, Social Security
	E <i>xampl</i> No		ty, or life			HSA); credit, homeowner's, or renter's insura	nce
	Yes. N	Name the insurance	e compa	ny of each p	olicy and list its value.		
			Com	pany name:		Beneficiary:	Surrender or refund value:
			Tern	pany name:	ance through currer	·	
32. A	f you a someor No		Tern emp that is d	n life insura loyer ue you from	ance through currer	nt	value: \$0.00
32. A	f you a someor No Yes. (Claims a Example No	re the beneficiary one has died. Give specific informagainst third part	Term emp that is d of a living	n life insurations in life	someone who has die	ed surance policy, or are currently entitled to rec	value: \$0.00
32. A 1 5 5 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6	f you a someon No Yes. (Claims: Example No Yes. I) Yes. I) Yes. I) Yes. I) Yes. I) No	re the beneficiary one has died. Give specific informagainst third part les: Accidents, emp	Term emp that is d of a living mation ies, whe oloymen m	n life insurationer loyer ue you from g trust, expected ther or not yet disputes, institutions.	someone who has die to proceeds from a life in you have filed a lawsu surance claims, or rights	ed surance policy, or are currently entitled to rec	\$0.00 seive property because
32. A	f you a someon No Yes. Other co No Yes. I No No No No	re the beneficiary one has died. Give specific informagainst third partiles: Accidents, employeescribe each claimontingent and unlingent and	Term emp that is d of a living mation ies, whe oloymen m liquidate m	n life insurationer loyer ue you from g trust, expected ther or not to disputes, insured the claims of	someone who has die to proceeds from a life in you have filed a lawsu surance claims, or rights	ed surance policy, or are currently entitled to receive to receive to read to	\$0.00 seive property because
32. A 1	f you a someon No No Yes. (Claims: Example No Yes. I No Yes. I No Yes. I No Yes. I Any fina No Yes. (Change of the	re the beneficiary one has died. Give specific informagainst third partiles: Accidents, employees each claimontingent and unlabescribe each claimancial assets you. Give specific informate dollar value of a contingent and unlabescribe each claimancial assets you.	Term emp that is d of a living mation ies, who oloymen m liquidate m did not mation	n life insurational loyer ue you from g trust, expected ther or not g t disputes, installed already list	someone who has die to proceeds from a life in you have filed a lawsu surance claims, or rights every nature, including a	ed surance policy, or are currently entitled to receive to receive to read to	\$0.00 seive property because
32. A 1	f you a someon No No Yes. (Claims: Example No Yes. (Control No Yes. (Contr	re the beneficiary one has died. Give specific informagainst third partives: Accidents, employees each claimontingent and unlaberabe each claimancial assets you. Give specific informate dollar value of art 4. Write that number here has died.	Term emp that is d of a living mation ies, whe oloymen m liquidate m did not mation all of you	n life insurational life insur	someone who has die to proceeds from a life in you have filed a lawsu surance claims, or rights every nature, including a	ed surance policy, or are currently entitled to receive or made a demand for payment sto sue g counterclaims of the debtor and rights to	\$0.00 seive property because

Official Form 106A/B Schedule A/B: Property page 5

☐ Yes. Go to line 38.

Case 17-14784 Doc 1 Filed 05/11/17 Entered 05/11/17 12:07:40 Desc Main Page 15 of 60 Document Debtor 1 **Matthew Solomon** Debtor 2 **Mona Solomon** Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$35,100.00 Part 3: Total personal and household items, line 15 57. \$2,715.00 Part 4: Total financial assets, line 36 \$38,933.28 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52

\$0.00

\$0.00

Copy personal property total

\$76,748.28

Official Form 106A/B Schedule A/B: Property page 6

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

60.

61.

\$76,748.28

\$76,748.28

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		Ducume	IL FAUE 10 01 00	
Fill in this infor	mation to identify your	case:		
Debtor 1	Matthew Solomo	n		
	First Name	Middle Name	Last Name	
Debtor 2	Mona Solomon			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				– 0
(if known)				☐ Check if this is amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$5,100.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$5,100.00		\$2,700.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$30,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$5,100.00 \$5,100.00 \$1,000.00	\$5,100.00	\$5,100.00 \$5,100.00 \$5,100.00 \$5,100.00 \$5,100.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00

Entered 05/11/17 12:07:40 Desc Main Case 17-14784 Filed 05/11/17 Doc 1 Document Page 17 of 60 **Matthew Solomon** Debtor 1 **Mona Solomon** Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption

Schedule A/B that lists this property	portion you own Copy the value from	Cho	ck only one box for each exemption.	
	Schedule A/B	One	ck only one box for each exemption.	
Necessary wearing apparel Line from Schedule A/B: 11.1	\$600.00		\$600.00	735 ILCS 5/12-1001(a)
			100% of fair market value, up to any applicable statutory limit	
iWatch, basic accessories Line from Schedule A/B: 12.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
1 dog ("Baby") Line from Schedule A/B: 13.1	\$5.00		\$5.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
CPAP machine Line from Schedule A/B: 14.1	\$10.00		\$10.00	735 ILCS 5/12-1001(e)
			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$60.00		\$60.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Checking: USAA Line from Schedule A/B: 17.1	\$136.12		\$136.12	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Checking: USAA Line from Schedule A/B: 17.2	\$10.51		\$10.51	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Savings (son's account): USAA Line from Schedule A/B: 17.3	\$15.64		\$15.64	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Savings: USAA Line from Schedule A/B: 17.4	\$2.00		\$2.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Chase: Checking Line from Schedule A/B: 17.5	\$895.52		\$895.52	735 ILCS 5/12-1001(b)
· · · · · · · · · · · · · · · · · · ·			100% of fair market value, up to any applicable statutory limit	
IRA: Chase Line from Schedule A/B: 21.1	\$26,280.57	•	\$26,280.57	735 ILCS 5/12-1006
Eine nom Genedale PVD. 2111			100% of fair market value, up to any applicable statutory limit	

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Matthew Solomon

Debtor 2 **Mona Solomon** Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 401k: LPL Financial 735 ILCS 5/12-1006 \$1,776.00 \$1,776.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 401k: Principal 735 ILCS 5/12-1006 \$2,593.08 \$2,593.08 Line from Schedule A/B: 21.4 100% of fair market value, up to any applicable statutory limit **Profit-sharing: Empower Retirement** 735 ILCS 5/12-1006 \$5,663.84 \$5,663.84 Line from Schedule A/B: 21.6 100% of fair market value, up to any applicable statutory limit Rent: (Landlord) 735 ILCS 5/12-1001(b) \$1,500.00 \$1,500.00 Line from Schedule A/B: 22.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes

Debtor 1

	Ca	se 17-14784	Doc 1	Filed 05/1 Docume		d 05/11/17 12:	07:40 Desc N	1ain
Filli	n this inform	nation to identify you	ır case:	Bocame	7 ddc 13	01 00		
Deb	tor 1	Matthew Solom	on					
Dob	tor O	First Name	Mi	iddle Name	Last Name			
	tor 2 ise if, filing)	Mona Solomon First Name	Mi	iddle Name	Last Name		-	
Unit	ed States Bar	nkruptcy Court for the	NORTI	HERN DISTRICT	OF ILLINOIS			
_							-	
(if kno	e number						☐ Check	if this is an
							amend	led filing
⊃ff:	cial Form	1060						
			· Who	Have Clai	ims Secured	l by Propert	V	12/15
<u> </u>	ilcadic	D. Creations	77110	i lave olai	ins secured	i by i ropert	<u>y</u>	12/13
s nee							upplying correct informa nal pages, write your na	
. Do	any creditors	have claims secured by	your prope	erty?				
ı	☐ No. Check	this box and submit t	his form to	the court with you	ur other schedules. Yo	ou have nothing else t	to report on this form.	
ı	Yes. Fill in	all of the information	below.					
Part	1: List Al	I Secured Claims						
			more than or	ne secured claim lis	at the creditor separately	Column A	Column B	Column C
for ea	ach claim. If mo	ore than one creditor has st the claims in alphabeti	a particular	claim, list the other	creditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	Nissan Mo	otor						•
۷.۱	Acceptance			the property that s	ecures the claim:	\$31,542.11	\$30,000.00	\$1,542.11
	Creditor's Name		2016 Nis	ssan Altima				
	PO Box 66	ะบระบ		date you file, the c	laim is: Check all that			
		75266-0360	apply. Conting	nent .				
		City, State & Zip Code	☐ Unliqui	-				
			☐ Dispute	ed				
_		bt? Check one.	Nature of	lien. Check all that	t apply.			
_	ebtor 1 only ebtor 2 only		An agre		such as mortgage or sec	ured		
_	ebtor 2 only ebtor 1 and De	btor 2 only	_	,	lien, mechanic's lien)			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$31,542.11

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$31,542.11

Last 4 digits of account number

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

0001

lacksquare At least one of the debtors and another

 $\hfill\square$ Check if this claim relates to a

Date debt was incurred 6/2016

community debt

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		Document	Page 2	0 of 60		
FIII IN thi	s information to identify your	case:				
Debtor 1	Matthew Solomor					
D 1 / 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, f	Mona Solomon First Name	Middle Name	Last Name		_	
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS			
Case nur (if known)	nber				_	heck if this is an mended filing
	Form 106E/F ule E/F: Creditors W	ho Have Unsecured	Claims			12/15
any execut Schedule (Schedule I eft. Attach name and (Part 1:	ory contracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Sec the Continuation Page to this pag case number (if known).		ist executory o o not include needed, copy t	ontracts on Schedul any creditors with pa the Part you need, fill	e A/B: Property (Officiantially secured claims I it out, number the ent	al Form 106A/B) and on that are listed in tries in the boxes on the
	y creditors have priority unsecure	d claims against you?				
■ No	. Go to Part 2.					
☐ Ye	s.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims				
3. Do an	y creditors have nonpriority unsec	cured claims against you?				
□ No	. You have nothing to report in this p	art. Submit this form to the court with	your other sche	edules.		
■ Ye	S.					
unsec	ured claim, list the creditor separately ne creditor holds a particular claim, li	aims in the alphabetical order of th y for each claim. For each claim listed st the other creditors in Part 3.If you h	, identify what t	ype of claim it is. Do n	ot list claims already inc	luded in Part 1. If more
						Total claim
[dvocate Lutheran General Iospital	Last 4 digits of acc	ount number	8741		\$88.21
N	onpriority Creditor's Name O Box 4249	When was the debt	incurred?			
	arol Stream, IL 60197					•
	umber Street City State Zlp Code	As of the date you	file, the claim i	s: Check all that apply	1	
_	/ho incurred the debt? Check one.					
L	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	$oldsymbol{I}$ At least one of the debtors and and	other Type of NONPRIOR	ITY unsecured	d claim:		
	Check if this claim is for a comrebt					
	the claim subject to offset?	☐ Obligations arisir report as priority clai		ration agreement or di	vorce that you did not	
	No	☐ Debts to pension	or profit-sharin	g plans, and other sim	ilar debts	
	Yes	Other. Specify	Medical de	bt		

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	Mona Solomon	Case number (if know)	
4.2	Capital One Bank USA NA	Last 4 digits of account number	\$2,239.02
	Nonpriority Creditor's Name PO Box 6492 Carol Stream, IL 60197	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured debt	
4.3	Capital One Bank USA NA	Last 4 digits of account number	\$1,298.55
	Nonpriority Creditor's Name PO Box 6492	When was the debt incurred?	
=	Carol Stream, IL 60197-6492		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacksquare Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured debt	
4.4	Capital One Bank USA NA	Last 4 digits of account number	\$3,551.00
	Nonpriority Creditor's Name PO Box 30281	When was the debt incurred? 5/2008	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Unsecured debt	
		— Outon Opeony	

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Debtor	2 Mona Solomon	Case number (if know)	
4.5	Capital One Bank USA NA	Last 4 digits of account number	\$728.00
	Nonpriority Creditor's Name PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred? 8/2010	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Unsecured debt	
4.6	Carecredit/Synchrony	Last 4 digits of account number 8612	\$805.43
	Nonpriority Creditor's Name PO Box 960061 Orlando, FL 32896	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured debt	
4.7	CBNA/National Tire	Last 4 digits of account number	\$3,725.00
	Nonpriority Creditor's Name PO Box 6497 Sioux Falls, SD 57117-6497	When was the debt incurred? 10/2009	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	lacktriangle Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Unsecured debt	

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Debto	r 2 Mona Solomon	Case number (if know)	
4.8	Comenity/Hot Topic	Last 4 digits of account number 6057	\$772.66
	Nonpriority Creditor's Name PO Box 659450	When was the debt incurred?	• • • • • • • • • • • • • • • • • • •
	San Antonio, TX 78265 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no of the date year me, the stain is. One of an that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured debt	
4.9	Comenity/Metrostyle	Last 4 digits of account number 8906	\$529.61
	Nonpriority Creditor's Name PO Box 659728 San Antonio, TX 78265	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured debt	
4.1	Comenity/Overstock	Last 4 digits of account number 1724	\$1,454.36
0	Nonpriority Creditor's Name	Last 4 digits of account number 1/24	Ψ1,404.00
	PO Box 659450 San Antonio, TX 78265	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Unsecured debt	

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2 Mona Solomon	Case number (if know)	
Comenity/Roamans	Last 4 digits of account number 5662	\$814.72
Nonpriority Creditor's Name PO Box 659728 San Antonio, TX 78265	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Unsecured debt	
Comenity/Roamans	Last 4 digits of account number	\$994.00
Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218	When was the debt incurred? 7/2011	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Unsecured debt	
Comenity/Venus	Last 4 digits of account number 5528	\$1,106.00
Nonpriority Creditor's Name		· ·
PO Box 659450 San Antonio, TX 78265	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Unsecured debt	

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Debtor Debtor	Mona Solomon Mona Solomon	Case number (if know)	
4.1 4	Comenity/Victoria's Secret	Last 4 digits of account number 2022	\$171.87
	Nonpriority Creditor's Name PO Box 659728 San Antonio, TX 78265	When was the debt incurred?	
-	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divoreport as priority claims	orce that you did not
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar	r debts
	Yes	Other. Specify Unsecured debt	
4.1 5	Credit First N.A.	Last 4 digits of account number	\$1,009.00
	Nonpriority Creditor's Name PO Box 81315 Cleveland, OH 44181-0315	When was the debt incurred? 6/2014	
-	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	□ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorseport as priority claims	orce that you did not
	■ No	☐ Debts to pension or profit-sharing plans, and other simila	r debts
	Yes	Other. Specify Unseucred debt	
4.1	Credit One Bank	Last 4 digits of account number	\$2,435.00
6	Nonpriority Creditor's Name		
	PO Box 98872 Las Vegas, NV 89193-8872	When was the debt incurred? 4/2012	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorseport as priority claims	,
	No	Debts to pension or profit-sharing plans, and other similar	r debts
	☐ Yes	Other. Specify Unsecured debt	

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Debtor Debtor	1 Matthew Solomon 2 Mona Solomon	Case number (if know)	
4.1 7	Glenn Medical Associates, S.C.	Last 4 digits of account number 8951	\$105.46
	Nonpriority Creditor's Name 2550 Compass Road Ste. C&D Glenview, IL 60026	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical debt	
4.1	Kohls	Last 4 digits of account number 4161	\$1,222.21
	Nonpriority Creditor's Name PO Box 3115	When was the debt incurred?	
	Milwaukee, WI 53201	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 9	Macy's	Last 4 digits of account number 3182	\$49.94
	Nonpriority Creditor's Name PO Box 8113	When was the debt incurred?	
	Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Unsecured debt	
		· · · · · · · · · · · · · · · · · · ·	

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Monroe and Main	Last 4 digits of account number 6110	\$583.56
Nonpriority Creditor's Name 1112 7th Avenue Monroe, WI 53566	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Unsecured debt	
Montgomery Ward	Last 4 digits of account number 6290	\$463.67
Nonpriority Creditor's Name 1112 7th Avenue Monroe, WI 53566	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Unsecured debt	
Northwestern Medicine	Last 4 digits of account number 8281	\$2,023.40
Nonpriority Creditor's Name 28155 Network Place	When was the debt incurred?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Chicago, IL 60673-1281 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical debt	

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Last 4 digits of account number 1209 When was the debt incurred? As of the date you file, the claim is: Check all that apply	\$422.62
As of the date you file, the claim is: Check all that apply	
Пол	
Li Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
_	
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify	
Last 4 digits of account number	\$1,670.00
When was the debt incurred? 02/1987	4 1,01010
As of the date you file the plain is: Check all that apply	
As of the date you file, the claim is: Check all that apply	
Contingent	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Other. Specify Unsecured debt	
Lost 4 digits of account number	\$4,432.00
	Ψ1,102.100
When was the dept incurred:	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
,	
☐ Obligations arising out of a separation agreement or divorce that you did not	
<u> </u>	
	Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify

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2 Mona Solomon	Case number (if know)	
SYNCB/HH Gregg	Last 4 digits of account number	\$4,103.00
Nonpriority Creditor's Name PO Box 965036	When was the debt incurred? 10/2011	
Orlando, FL 32896-5036 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Unsecured debt	
SYNCB/Home Design	Last 4 digits of account number	\$734.00
Nonpriority Creditor's Name PO Box 965036	When was the debt incurred? 10/2004	
Orlando, FL 32896-5036 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Unsecured debt	
SYNCB/Pearle Vision	Last 4 digits of account number	\$630.00
Nonpriority Creditor's Name PO Box 965036	When was the debt incurred? 12/2014	
Orlando, FL 32896-5036	- As the last of the development	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Unsecured debt	

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Debtor 1 Debtor 2	Matthew Mona Sol			Case r	number (if	know)		
4.2 9	TD Bank US	SA/Target Credit	Last 4 digits of account number	1690	ı			\$1,174.46
<u> </u>	Nonpriority Creditor's Name PO Box 660170		When was the debt incurred?			-		
	Dallas, TX 7	75266-0170 City State ZIp Code	As of the date you file, the claim	c. Chaol	call that an	nlv		
		the debt? Check one.	As of the date you life, the claim	S. Check	k ali tilat ap	ріу		
	Debtor 1 on		☐ Contingent					
	_	•						
	■ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed							
		•	Type of NONPRIORITY unsecure	d claim:				
		of the debtors and another	☐ Student loans	d Ciaiiii.				
	ഥ Check if thi debt	is claim is for a community	☐ Obligations arising out of a sepa	ration or	roomant a	r diverse that you s	did not	
		bject to offset?	report as priority claims	iration ag	greement of	r divorce that you c	אום חטנ	
	No		Debts to pension or profit-sharing	g plans,	and other s	similar debts		
	☐ Yes		Other. Specify Unsecured	debt				
4.3	USAA Savi	ngs Bank	Last 4 digits of account number					\$3,989.00
	Nonpriority Cre					_	-	
		ermott Fwy o, TX 78288-1600	When was the debt incurred?	09/20	005		_	
		City State Zlp Code	As of the date you file, the claim	s: Check	k all that ap	ply		
,	Who incurred	the debt? Check one.	•					
	Debtor 1 on	ly	☐ Contingent					
	Debtor 2 on	ly	☐ Unliquidated					
	Debtor 1 an	d Debtor 2 only	Disputed					
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
		is claim is for a community	☐ Student loans					
	debt	bject to offset?	Obligations arising out of a separeport as priority claims	ration ag	greement o	r divorce that you o	did not	
	■ No		Debts to pension or profit-sharing	g plans,	and other s	similar debts		
	☐ Yes		Other. Specify Unsecured	debt				
is tryin have m	s page only if y g to collect fro lore than one o d for any debts	om you for a debt you owe to som	out your bankruptcy, for a debt that y leone else, list the original creditor ir you listed in Parts 1 or 2, list the addi submit this page.	Parts 1	or 2, then	list the collection	agency here	. Similarly, if you
		, ·	s. This information is for statistical r	eporting	purposes	only. 28 U.S.C. §	159. Add the a	amounts for each
type of	unsecured cla	aim.						
	0-	Damastic arms at abligations		0-		Total Claim		
Te	otal	Domestic support obligations		6a.	\$		0.00	
clai	ims							
from Pa		Taxes and certain other debts	=	6b.	\$		0.00	
	6c. 6d.		jury while you were intoxicated cured claims. Write that amount here.	6c. 6d.	\$ 		0.00	
		and an outer phony and			Ψ		<u> </u>	
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$		0.00	
						Total Claim		
	6f.	Student loans		6f.	\$	Total Claim	0.00	
To clai	otal ims							
from Pa		Obligations arising out of a sep you did not report as priority of	paration agreement or divorce that aims	6g.	\$		0.00	

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Debtor 1 Debtor 2 Matthew Solomon Case number (if know)

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
6j. Total Nonpriority. Add lines 6f through 6i.
6j. \$ 43,325.75

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		Bodanie	THE T GOOD OF OT CO	
Fill in this infor	mation to identify your	case:		
Debtor 1	Matthew Solomo	n		
	First Name	Middle Name	Last Name	
Debtor 2	Mona Solomon			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Caroline Sudhakar 606 S. Roselle Road Schaumburg, IL 60193 Case 17-14784 Doc 1 Filed 05/11/17 Entered 05/11/17 12:07:40 Desc Main

		Document	Page 33 c	of 60	
Fill in this i	information to identify your	case:			
Debtor 1	Matthew Solomor	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Mona Solomon First Name	Middle Name	Last Name		
	<i>5,</i>				
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF	- ILLINOIS		
Case numb	per			_	
(if known)					Check if this is an amended filing
					amended ming
Official	Form 106H				
Sched	ule H: Your Code	ebtors			12/15
ill it out, an our name		boxes on the left. Attach th Answer every question.	e Additional Page t	ion. If more space is needed, of othis page. On the top of any as a codebtor.	
=					
■ No □ Yes					
L res					
	in the last 8 years, have you a, California, Idaho, Louisiana,			y? (Community property states a ington, and Wisconsin.)	and territories include
■ No. 0	Go to line 3.				
☐ Yes.	Did your spouse, former spou	se, or legal equivalent live wi	ith you at the time?		
in line Form 1	2 again as a codebtor only if	that person is a guarantor	or cosigner. Make	if your spouse is filing with yo sure you have listed the credit 6G). Use Schedule D, Schedul	or on Schedule D (Official
	Column 1: Your codebtor lame, Number, Street, City, State and ZII	² Code		Column 2: The creditor to Check all schedules that ap	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
<u> </u>	Number Street			_	
C	City	State	ZIP Code		
				_	
3.2	Name			Schedule D, line	
,				☐ Schedule E/F, line ☐ Schedule G, line	
	Number Street				
IN	TOTAL SUITER				

State

City

ZIP Code

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Deb	tor 1	Matthew So	lomon		
	tor 2	Mona Solom	non		
Unit	ed States Bankruptc	y Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS	
(If kn	,	1061			Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:
	ficial Form				MM / DD/ YYYY
	hedule I: Y				12/1
supp spou attac	olying correct informuse. If you are separate sheet	nation. If you rated and you	are married and not fili ir spouse is not filing w	ng jointly, and your spouse is living ith you, do not include information	d Debtor 2), both are equally responsible for with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every questio
supp spou attac	olying correct informuse. If you are separate sheet	mation. If you rated and you to this form.	are married and not fili ir spouse is not filing w	ng jointly, and your spouse is living ith you, do not include information	with you, include information about your about your spouse. If more space is needed,
supp spou	olying correct informuse. If you are separate sheet	mation. If you rated and you to this form.	are married and not fili ir spouse is not filing w	ng jointly, and your spouse is living ith you, do not include information	with you, include information about your about your spouse. If more space is needed,
supp spou attac Par	olying correct informuse. If you are separate sheet Describe Fill in your employ	mation. If you rated and you to this form. Employment	are married and not fili ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and ca	g with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every questio
supp spou attac	clying correct information. If you have more thattach a separate pinformation about a	mation. If you rated and you to this form. Employment rment an one job, age with	are married and not fili ir spouse is not filing w	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and control ional pages.	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question
supp spou attac Par	clying correct information. If you have more that a separate sheet Till in your employinformation. If you have more thattach a separate p	mation. If you rated and you to this form. Employment rment an one job, age with	are married and not fili ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and cape better 1 Employed	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every questio Debtor 2 or non-filing spouse Employed
supp spou attac Par	clying correct information. If you have more thattach a separate pinformation about a	mation. If you rated and you to this form. Employment rement an one job, age with dditional easonal, or	are married and not fili ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and continuous pages, write your name and continuous pages. Debtor 1 Employed Not employed	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every questio Debtor 2 or non-filing spouse Employed Not employed
supp spou attac Par	Describe Fill in your employ information. If you have more th attach a separate p information about a employers.	mation. If you rated and you to this form. Employment ment an one job, age with dditional easonal, or the clude student	are married and not fili ir spouse is not filing w On the top of any additi Employment status Occupation	ng jointly, and your spouse is living ith you, do not include information ional pages, write your name and complete the pages. Debtor 1 Employed Not employed Global Logistics	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every questio Debtor 2 or non-filing spouse Employed Not employed Office Manager Mark A. Hofmeister, D.D.S.
supp spou attac Par	Describe Till in your employ information. If you have more th attach a separate p information about a employers. Include part-time, s self-employed work Occupation may income the position of the part-time, s self-employed work	mation. If you rated and you to this form. Employment ment an one job, age with dditional easonal, or the clude student	are married and not fili ir spouse is not filing w On the top of any additi Employment status Occupation Employer's name	pebtor 1 Employed Global Logistics Echo 600 W. Chicago Avenue, Suit 725 Chicago, IL 60654	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed Office Manager Mark A. Hofmeister, D.D.S.
supp spou attac Par	Polying correct information. If you have more the attach a separate p information about a employers. Include part-time, s self-employed work. Occupation may incorrhomemaker, if it	mation. If you rated and you to this form. Employment ment an one job, age with dditional easonal, or the clude student	are married and not filing work on the top of any additions the top of any additions. Employment status Occupation Employer's name Employer's address How long employed to	pebtor 1 Employed Global Logistics Echo 600 W. Chicago Avenue, Suit 725 Chicago, IL 60654	with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed Office Manager Mark A. Hofmeister, D.D.S.

more space, attach a separate sheet to this form.

0.00

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 4,179.65 3,911.92 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 0.00 3. +\$ Calculate gross Income. Add line 2 + line 3. 4,179.65 3,911.92

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	otor 1 otor 2	Matthew Solomon Mona Solomon	_		Case	e number (<i>if known</i>)	_			
						r Debtor 1		For Debtor	pouse	
	Cop	y line 4 here	4.		\$_	4,179.65		\$3	,911.92	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	627.51	;	\$	770.94	
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$	0.00		\$	0.00	-
	5c.	Voluntary contributions for retirement plans	50	.	\$	83.59		\$	0.00	-
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	:	\$	0.00	-
	5e.	Insurance	56	€.	\$	829.40	:	\$	0.00	-
	5f.	Domestic support obligations	5f		\$	0.00	:	\$	0.00	-
	5g.	Union dues	50	g.	\$	0.00	:	\$	0.00	
	5h.	Other deductions. Specify: Transit	5h	า.+	\$	203.41	+ :	\$	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,743.91	:	\$	770.94	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,435.74	:	\$3	140.98	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88		\$	0.00		\$	0.00	
	8b.	Interest and dividends	8k		\$-	0.00		\$	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$_ \$	0.00		\$	0.00	-
	8d.	Unemployment compensation	80		\$	0.00		\$	0.00	_
	8e.	Social Security	86		\$	0.00		\$	0.00	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f		\$_	0.00		\$	0.00	-
	8g.	Pension or retirement income	80		\$_	0.00		\$	0.00	_
	8h.	Other monthly income. Specify: Part-time job (Walgreens)	8h	า.+	\$_	353.18	+ :	\$	0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	353.18		\$	0.00	D
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,788.92 + \$		3,140.98	= \$	5,929.90
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		2,700.32		3,140.30	$ ^{ \Psi } -$	3,323.30
11.	Inclu othe	e all other regular contributions to the expenses that you list in <i>Schedule</i> adde contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	dep					in Schedule	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							\$	5,929.90
									Combin monthl	ned y income
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?							,
		Yes. Explain:								

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Fill	in this informa	ition to identify yo	ur case:						
	tor 1	Matthew Sol				Ch	eck if this is:		
		Matthew 301	OIIIOII				An amende	ed filing	
	tor 2	Mona Solom	on					ent showing postpetition	
(Spo	ouse, if filing)						13 expense	es as of the following da	ate:
Unit	ed States Bankı	ruptcy Court for the:	NORTH	IERN DISTRICT OF ILLII	NOIS		MM / DD / Y	YYYY	
1	e number nown)								
O	fficial Fo	rm 106J							
So	chedule	J: Your I	Exper	ses					12/1
Be info	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	possible. eded, atta y question	If two married people a					
Par 1.	t 1: Desci Is this a joir	ribe Your House	hold						
١.	□ No. Go to								
	_	s Debtor 2 live i	n a separ	ate household?					
	■ N	o		al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of De	btor 2.		
2.	Do you hay	e dependents?	□ No						
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Depende age	ent's Does depen	
	Do not state dependents				Son		12	□ No ■ Yes	_
								□ No	
								□ Yes □ No	
								☐ Yes	
							_	□ No	
3.	Do your ex	oenses include	_					Pes	
J.	expenses o	f people other the d your depender	nan 👝	No Yes					
Est	imate your ex		our bankrı	y Expenses uptcy filing date unless y is filed. If this is a sup					
the		h assistance and		government assistance luded it on <i>Schedule I:</i>			Yo	our expenses	
4.		or home owners		ses for your residence. r lot.	Include first mortgag	e 4.	\$	1,500.0	0
		led in line 4:	J						
						_	•		_
		estate taxes rty, homeowner's	or renter	's insurance		4a. 4b.		0.0	
	•	•		s insurance ipkeep expenses		40. 4c.	:	50.0	
	4d. Home	owner's associat	ion or cond	dominium dues		4d.	\$	0.0	
5.	Additional r	mortgage payme	ents for yo	our residence, such as h	ome equity loans	5.	\$	0.0	0

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	tor 1 tor 2	Matthew Solomon Mona Solomon	Case num	ber (if know	vn)
0	1.14:1:4:				
6.	Utiliti 6a.	les: Electricity, heat, natural gas	6a.	\$	130.00
	6b.	Water, sewer, garbage collection	6b.		65.00
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		400.00
	6d.	Other. Specify:	6d.		0.00
7.		and housekeeping supplies	_ 7.	· —	750.00
8.		Icare and children's education costs	8.	·	100.00
9.		ning, laundry, and dry cleaning	9.	·	50.00
10.		onal care products and services	10.		40.00
11.		cal and dental expenses	11.		300.00
		sportation. Include gas, maintenance, bus or train fare.		·	
12.		of include car payments.	12.	\$	150.00
13.		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Char	itable contributions and religious donations	14.	\$	0.00
15.	Insur	rance.			
	Do no	ot include insurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insurance	15a.	\$	67.00
	15b.	Health insurance	15b.	\$	0.00
	15c.	Vehicle insurance	15c.	\$	0.00
	15d.	Other insurance. Specify: Combined renter's/car insurance	15d.	\$	206.00
16.	Taxe Spec	 s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: 	 16.	\$	0.00
17.		Ilment or lease payments:	_		
	17a.	Car payments for Vehicle 1	17a.	\$	614.66
	17b.	Car payments for Vehicle 2	17b.	\$	0.00
	17c.	Other. Specify:	17c.	\$	0.00
	17d.	Other. Specify:	17d.	\$	0.00
18.		payments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	 18.	\$	0.00
19.	Othe	r payments you make to support others who do not live with you.		\$	0.00
	Spec		19.		
20.		r real property expenses not included in lines 4 or 5 of this form or on Sched			
		Mortgages on other property	20a.		0.00
		Real estate taxes	20b.	·	0.00
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify: Gym membership (medically necessary)	21.	+\$	130.00
22.	Calc	ulate your monthly expenses			
		Add lines 4 through 21.		\$	4,552.66
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	1,552155
		Add line 22a and 22b. The result is your monthly expenses.		\$	4,552.66
	220. /	Add line 22d and 22b. The result is your monthly expenses.		Ψ	4,332.00
23.		ulate your monthly net income.			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,929.90
	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,552.66
	23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	1,377.24
24.	For ex	ou expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect your no cation to the terms of your mortgage?			increase or decrease because of a
		-Apidii 11010.			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Matthew Solomoi				
	First Name	Middle Name	Last Name		
Debtor 2	Mona Solomon				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Case number (if known)					☐ Check if this is an
,					amended filing
You must file thi obtaining money years, or both. 1	is form whenever you fi y or property by fraud ir 8 U.S.C. §§ 152, 1341, 1	le bankruptcy schedulen connection with a ba		. Making a false stateı	ment, concealing property, or), or imprisonment for up to 20
Sig	n Below				
Did you pa ■ No	y or agree to pay some	one who is NOT an att	orney to help you fill out b	ankruptcy forms?	
INO					
☐ Yes. I	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
•	alty of perjury, I declare e true and correct.	that I have read the su	mmary and schedules file	d with this declaration	n and
X /s/ Mat	tthew Solomon		X /s/ Mona S	olomon	
Matthe	ew Solomon		Mona Solo	mon	

Signature of Debtor 2

Date May 08 2017

Signature of Debtor 1

Date May 08 2017

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Fill in this inform	nation to identify you	r case:			
Debtor 1	Matthew Solomo				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2	Mona Solomon				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case number				_	Check if this is an mended filing
	of Financial	Affairs for Indivic		ankruptcy equally responsible for sup	4/10
Part 1: Give D	n). Answer every que	stion. arital Status and Where You		y additional pages, write you	ur name and case
☐ Not mar	rried				
2. During the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
□ No ■ Yes. Lis	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	ı.	
Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
	/indsor Dr. ke, IL 60073	From-To: 2003 to Augus 2016	Same as Debtor	1	■ Same as Debtor 1 From-To:
No Yes. Ma Part 2 Explai 4. Did you have	ies include Arizona, Ca ake sure you fill out <i>Scl</i> in the Sources of You e any income from en	lifornia, Idaho, Louisiana, New Chedule H: Your Codebtors (Of Or Income	vada, New Mexico, Puerto R ficial Form 106H). g a business during this ye	ity property state or territory ico, Texas, Washington and W	visconsin.)
		have income that you receive			
Yes. Fill	I in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$14,317.23	■ Wages, commissions, bonuses, tips	\$14,474.00
		☐ Operating a business		☐ Operating a business	
Official Form 107		Statement of Financial Affe	airs for Individuals Filing for B	ankruntev	nage

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Debtor 1 Matthew Solomon

Debtor 2 Mona Solomon			Case number (if known)				
		D. I	ebtor 1 Debtor 2				
		Sou	rces of income cck all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
	alendar year: 1 to December 3	いついれんり	Wages, commissions, uses, tips	\$0.00	■ Wages, comr	nissions,	\$0.00
			Operating a business		☐ Operating a b	ousiness	
For the ca	alendar year bef 1 to December 3	21 2015 \	Wages, commissions, uses, tips	\$0.00	■ Wages, commonutes, tips	nissions,	\$0.00
			Operating a business		☐ Operating a b	ousiness	
winnings. If you are filing a joint case and you have income that you received togethe List each source and the gross income from each source separately. Do not include if No Yes. Fill in the details.				•	•		
		Deb	tor 1		Debtor 2		
			rces of income cribe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.		Gross income (before deductions and exclusions)
Part 3:	List Certain Pag	yments You Made	Before You Filed for E	Sankruptcy			
□ N	No. Neither De individual p During the No. Yes * Subject to	btor 1 nor Debtor rimarily for a perso 90 days before you Go to line 7. List below each of paid that creditor not include paymo adjustment on 4. r Debtor 2 or botl 90 days before you Go to line 7. List below each of include payments	onal, family, or household ufiled for bankruptcy, did reditor to whom you paid. Do not include payment ents to an attorney for th (01/19 and every 3 years in have primarily consulutiled for bankruptcy, did reditor to whom you paid for domestic support ob	mer debts. Consumer debts by the purpose." I you pay any creditor a total of \$6,425* or more so for domestic support oblists bankruptcy case. after that for cases filed or	al of \$6,425* or more paying ations, such as ching or after the date of all of \$600 or more?	e? ments and the support a fadjustment for a digneral control of the support a fadjustment for a digneral control of the support a fadjustment for a digneral control of the support a fadjustment for a digneral control of the support a fadjustment for a digneral control of the support a fadjustment for a digneral control of the support a fadjustment for	he total amount you and alimony. Also, do
		attorney for this b					
Credi	itor's Name and	Address	Dates of paymer	nt Total amount paid	Amount you still owe	Was this p	payment for

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Matthew Solomon

Deb	tor 2	Mona Solomon		Cas	se number (if known		
	<i>Inside</i> of wh	n 1 year before you filed for bankrupters include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yog g securities; and a	ou are a genera any managing a	al partner; corporations gent, including one fo
	_	No					
		Yes. List all payments to an insider. der's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			. ,	paid	still owe		, ,
	insid	n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos		ments or transfer a	any property on a	account of a d	ebt that benefited an
	= 1	No					
	□ `	Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Part	4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
	List a	n 1 year before you filed for bankrupter ll such matters, including personal injury ications, and contract disputes.					
		No Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	e case
		n 1 year before you filed for bankrupton k all that apply and fill in the details below		erty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?
		No. Go to line 11. Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property		Date	•	Value of the property
			Explain what happened	d			r sps 3
11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank accounts or refuse to make a payment because you owed a debt? No				luding a bank or fir	nancial institutio	n, set off any a	amounts from your
		Yes. Fill in the details.					
	Cred	litor Name and Address	Describe the action the	e creditor took	Date take	action was	Amount
		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		erty in the possess	ion of an assign	ee for the bene	efit of creditors, a
	_	No Yes					
Part	5:	List Certain Gifts and Contributions					
13.	= 1	n 2 years before you filed for bankrup	etcy, did you give any gift	s with a total value	of more than \$6	00 per person'	?
	Gifts	Yes. Fill in the details for each gift. s with a total value of more than \$600 person	Describe the gifts		Date the g	s you gave gifts	Value
		on to Whom You Gave the Gift and ress:					

Debtor 1

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Matthew Solomon

Deb	otor 2 Mona Solomon		Case	e number (if known)		
14.	■ No						
	Gifts or contributions to charities more than \$600 Charity's Name Address (Number, Street, City, State and 2	that total	Describe what you contributed		Dates you contributed	Value	
Part	t 6: List Certain Losses						
	Within 1 year before you filed for b or gambling?	ankruptcy o	r since you filed for bankruptcy, did you	lose anyti	hing because of the	ft, fire, other disaster,	
	□ No ■ Yes. Fill in the details.						
	Describe the property you lost an	d Desc	ribe any insurance coverage for the loss		Date of your	Value of property	
	how the loss occurred		le the amount that insurance has paid. List pance claims on line 33 of Schedule A/B: Pro		loss	lost	
	Car accident; 2013 Chevy Cruz was totalled when other driver ran red light				June 10, 2016	\$0.00	
	consulted about seeking bankrupt Include any attorneys, bankruptcy pe No Yes. Fill in the details.		ing a bankruptcy petition? ers, or credit counseling agencies for service	es required	in your bankruptcy.		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if	Not You	Description and value of any property transferred	′	Date payment or transfer was made	Amount of payment	
	Lakelaw 53 W. Jackson Suite 1610 Chicago, IL 60604 dleibowitz@lakelaw.com Debtor 1's father, Robert		\$4,000 attorneys fees and \$310 cocosts; by way of disclosure, Robe contemporaneously paid Lakelaw \$1,000 for work other than this bankruptcy proceeding	ert	Personal check rec'd 4/20/17	\$4,310.00	
	Within 1 year before you filed for b promised to help you deal with you Do not include any payment or transf	ur creditors	did you or anyone else acting on your be or to make payments to your creditors? sted on line 16.	half pay o	r transfer any prope	rty to anyone who	
	■ No						
	☐ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any property transferred	/	Date payment or transfer was made	Amount of payment	

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Matthew Solomon Debtor 1 Debtor 2 **Mona Solomon**

Case number (if known)

18.	8. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and va property transferre		Describe any property or payments received or debts paid in exchange	Date transfer was made			
	Person's relationship to you							
19.	 9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 							
	Name of trust	Description and va	alue of the prope	erty transferred	Date Transfer was			
		·			made			
Par	rt 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Stor	age Units				
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	were any financial acc	counts or instrun	nents held in your name, or for yo	our benefit, closed,			
	Include checking, savings, money market, or o	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.						
	Yes. Fill in the details.							
		ast 4 digits of account number	Type of accoun instrument	t or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box o cash, or other valuables?				safe deposit box or other deposi	tory for securities,			
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		escribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your	home within 1 ye	ear before you filed for bankruptc	y?			
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		escribe the contents	Do you still have it?			
Par	rt 9: Identify Property You Hold or Control fo	r Someone Fise						
	Do you hold or control any property that some		ide any property	you borrowed from, are storing fo	or, or hold in trust			
for someone. No								
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP		escribe the property	Value			
	,	Code)						
	rt 10: Give Details About Environmental Inform							
-or	the purpose of Part 10, the following definition	s apply:						
	Environmental law means any federal, state, o	or local statute or regu	lation concernin	g pollution, contamination, releas	ses of hazardous or			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Debtor 1 Matthew Solomon
Debtor 2 Mona Solomon

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property as of	·	v, whether you now own, operate, o	or utilize it or used			
_	to own, operate, or utilize it, including disposal s						
	Hazardous material means anything an environn hazardous material, pollutant, contaminant, or si		raste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that you	u know about, regardless of when t	ney occurred.				
24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No						
	☐ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any r	release of hazardous material?					
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administ	trative proceeding under any enviro	nmental law? Include settlements a	and orders.			
	■ No						
	Yes. Fill in the details.						
	Case Title	Court or agency N	lature of the case	Status of the			
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case			
Par	t 11: Give Details About Your Business or Conn	nections to Any Business					
27	Wishin A vector hefers you filed for health makes d		of the fallowing connections to an	, husinees 2			
21.	Within 4 years before you filed for bankruptcy, d		-	business?			
	☐ A sole proprietor or self-employed in a tr	•	·				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executi	ve of a corporation					
	☐ An owner of at least 5% of the voting or €	equity securities of a corporation					
	□ No. None of the above applies. Go to Part 12.						

Business Name

Address (Number, Street, City, State and ZIP Code)

Mary Kay and Origami Owl

Describe the nature of the business

Name of accountant or bookkeeper

(Debtor 2 tried direct marketing

for a bit, but it never came to

anything)

Yes. Check all that apply above and fill in the details below for each business.

Employer Identification number

Dates business existed

From-To 2011 - 2017

EIN:

Do not include Social Security number or ITIN.

Case 17-14784 Doc 1 Filed 05/11/17 Entered 05/11/17 12:07:40 Desc Main Page 45 of 60 Document Debtor 1 **Matthew Solomon Mona Solomon** Debtor 2 Case number (if known) 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Matthew Solomon /s/ Mona Solomon **Mona Solomon Matthew Solomon** Signature of Debtor 1 Signature of Debtor 2 Date Date May 08 2017 May 08 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-14784 Doc 1 Filed 05/11/17 Entered 05/11/17 12:07:40 Desc Main Document Page 50 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

	Matthew Solomon		C. N			
In	Mona Solomon	Debtor(s)	Case No. Chapter	13		
	DISCU OSUDE OF COMPE			EDEOD (C)		
	DISCLOSURE OF COMPE	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filible rendered on behalf of the debtor(s) in contemplation	, or agreed to be paid	l to me, for services rendered or to			
	For legal services, I have agreed to accept		\$	4,000.00		
	Prior to the filing of this statement I have received		\$	4,000.00		
	Balance Due		. \$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are men	nbers and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na					
5.	In return for the above-disclosed fee, I have agreed to n	render legal service for all aspec	ts of the bankruptcy	case, including:		
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] As governed by Court-Approved Retention Agreement annexed hereto 					
6.	By agreement with the debtor(s), the above-disclosed for	ee does not include the following	g service:			
		CERTIFICATION				
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for	r payment to me for	representation of the debtor(s) in		
	May 08 2017	/s/ David P. Leibo	owitz			
_	Date	David P. Leibowi	tz 1612271			
		Signature of Attorne Lakelaw	ey .			
		420 W. Clayton S				
		Waukegan, IL 60 8472499100 Fax				
		dleibowitz@lake				
		Name of law firm				

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Debtor has minimal funds and most work will be done at the outset of this case

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4000.00					
2.	In addition, the debtor will pay the filing fee in the case and other expenses of $\frac{310.00}{}$.				
3.	. Before signing this agreement, the attorney received \$ 4310.00				
	toward the flat fee, leaving a balance due of $\$ 0$; and $\$ 0$ for expenses,				
	leaving a balance due of \$0				
4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.					
Date: April 14, 2017					
Signed:					
M	atthew Solomon Market III				
M	ona Solomon McMala David P. Leibowitz				
D	ebtor(s) Attorney for the Debtor(s)				
Do not sign this agreement if the amounts are blank.					

United States Bankruptcy Court Northern District of Illinois

In re	Matthew Solomon Mona Solomon		Case No.	
	mona colonien	Debtor(s)	Chapter 13	
	V	ERIFICATION OF CREDITOR M	IATRIX	
	Number of Creditors:		Creditors:	30
	(our) knowledge.			
Date:	May 08 2017	/s/ Matthew Solomon		
		Matthew Solomon		
		Signature of Debtor		
Date:	May 08 2017	/s/ Mona Solomon		
		Mona Solomon		
		Signature of Debtor		

Advocate Lutheran General Hospital PO Box 4249 Carol Stream, IL 60197

Capital One Bank USA NA PO Box 6492 Carol Stream, IL 60197

Capital One Bank USA NA PO Box 6492 Carol Stream, IL 60197-6492

Capital One Bank USA NA PO Box 30281 Salt Lake City, UT 84130

Carecredit/Synchrony PO Box 960061 Orlando, FL 32896

CBNA/National Tire PO Box 6497 Sioux Falls, SD 57117-6497

Comenity/Hot Topic PO Box 659450 San Antonio, TX 78265

Comenity/Metrostyle PO Box 659728 San Antonio, TX 78265

Comenity/Overstock PO Box 659450 San Antonio, TX 78265

Comenity/Roamans PO Box 659728 San Antonio, TX 78265

Comenity/Roamans PO Box 182789 Columbus, OH 43218 Comenity/Venus PO Box 659450 San Antonio, TX 78265

Comenity/Victoria's Secret PO Box 659728 San Antonio, TX 78265

Credit First N.A. PO Box 81315 Cleveland, OH 44181-0315

Credit One Bank PO Box 98872 Las Vegas, NV 89193-8872

Glenn Medical Associates, S.C. 2550 Compass Road Ste. C&D Glenview, IL 60026

Kohls PO Box 3115 Milwaukee, WI 53201

Macy's PO Box 8113 Mason, OH 45040

Monroe and Main 1112 7th Avenue Monroe, WI 53566

Montgomery Ward 1112 7th Avenue Monroe, WI 53566

Nissan Motor Acceptance PO Box 660360 Dallas, TX 75266-0360

Northwestern Medicine 28155 Network Place Chicago, IL 60673-1281 SYNCB/BP PO Box 530942 Atlanta, GA 30353-0942

SYNCB/BP PO Box 965024 Orlando, FL 32896

SYNCB/Care Credit PO Box 965036 Orlando, FL 32896-5036

SYNCB/HH Gregg PO Box 965036 Orlando, FL 32896-5036

SYNCB/Home Design PO Box 965036 Orlando, FL 32896-5036

SYNCB/Pearle Vision PO Box 965036 Orlando, FL 32896-5036

TD Bank USA/Target Credit PO Box 660170 Dallas, TX 75266-0170

USAA Savings Bank 10750 McDermott Fwy San Antonio, TX 78288-1600